

File in this information to identify the case:

Debtor name XCOR Aerospace, Inc., a California Corporation

United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 202

# Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1006 and 9011.

**WARNING** – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)
- ☒ Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- ☒ Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- ☒ Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- ☒ Schedule H: Codebtors (Official Form 206H)
- ☒ Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- ☐ Amended Schedule
- ☒ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration Corporate Ownership Statement

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 17, 2017

X

  
Signature of individual signing on behalf of debtor

Michael A. Blum

Printed name

CEO

Position or relationship to debtor

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United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA

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# Official Form 206Sum

## Summary of Assets and Liabilities for Non-Individuals

12/15

### Part 1: Summary of Assets

#### 1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

|                                      |                 |
|--------------------------------------|-----------------|
| 1a. Real property:                   |                 |
| Copy line 88 from Schedule A/B.....  | \$ 0.00         |
| 1b. Total personal property:         |                 |
| Copy line 91A from Schedule A/B..... | \$ 1,106,624.21 |
| 1c. Total of all property:           |                 |
| Copy line 92 from Schedule A/B.....  | \$ 1,106,624.21 |

### Part 2: Summary of Liabilities

#### 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D..... \$ 3,860,756.59

#### 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

|  |                   |
|--|-------------------|
| 3a. Total claim amounts of priority unsecured claims:                                |                   |
| Copy the total claims from Part 1 from line 5a of Schedule E/F.....                  | \$ 13,364.55      |
| 3b. Total amount of claims of nonpriority amount of unsecured claims:                |                   |
| Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F..... | +\$ 23,586,429.01 |

|                            |                  |
|----------------------------|------------------|
| 4. Total liabilities ..... |                  |
| Lines 2 + 3a + 3b          | \$ 27,460,550.15 |

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Debtor name XCOR Aerospace, Inc., a California CorporationUnited States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA

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## Official Form 206A/B

## Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: **Cash and cash equivalents**

## 1. Does the debtor have any cash or cash equivalents?

☐ No. Go to Part 2.☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. **Cash on hand**\$105.673. **Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. First Capital Bank of TexasChecking5337\$1,164.253.2. First Capital Bank of TexasChecking/Debit6541\$154.744. **Other cash equivalents (Identify all)**5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$1,424.66Part 2: **Deposits and Prepayments**

## 6. Does the debtor have any deposits or prepayments?

☐ No. Go to Part 3.☒ Yes Fill in the information below.7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. Deposits (Equipment)\$17,824.00

Case number (If known)

### 8.1. Prepaid Insurances

**\$72,308.38**

**\$90,132.38**

Add lines 7 through 8. Copy the total to line 81.

**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes Fill in the information below.

11. **Accounts receivable**

|                           |                   |   |                                    |        |                     |
|---------------------------|-------------------|---|------------------------------------|--------|---------------------|
| 11a. 90 days old or less: | <u>173,342.07</u> | - | <u>All</u>                         | = .... | <u>\$173,342.07</u> |
|                           | face amount       |   | doubtful or uncollectible accounts |        |                     |

|                           |                          |   |                                    |        |                     |
|---------------------------|--------------------------|---|------------------------------------|--------|---------------------|
| 11a. 90 days old or less: | <u>264,125.91</u>        | - | <u>Unknown</u>                     | = .... | <u>\$264,125.91</u> |
|                           | face amount              |   | doubtful or uncollectible accounts |        |                     |
|                           | Intercompany Receivables |   |                                    |        |                     |

**\$437,467.98**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**13. Does the debtor own any investments?**

- ☐ No. Go to Part 5.
- ☒ Yes Fill in the information below.

**Current value of debtor's interest**

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

|                 |                |
|-----------------|----------------|
| Name of entity: | % of ownership |
|-----------------|----------------|

|       |  |   |        |
|-------|--|---|--------|
| 15.1. | Interest in Orbital Outfitters - out of business, no value | % | \$0.00 |
|-------|--|---|--------|

|       |                     |             |          |                |
|-------|---------------------|-------------|----------|----------------|
| 15.2. | <b>SXC USA, LLC</b> | <b>100%</b> | <b>%</b> | <b>Unknown</b> |
|-------|---------------------|-------------|----------|----------------|

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**  
Describe:

**\$0.00**

Add lines 14 through 16. Copy the total to line 83.

**Part 5: Inventory, excluding agriculture assets**



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Name

Case number (if known) \_\_\_\_\_

## 18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.  
☒ Yes Fill in the information below.

|     | General description  | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|-----|--|-------------------------------------|---|---|------------------------------------|
| 19. | Raw materials<br>Miscellaneous parts and raw material. (Midland and Mojave)                        |                                     |   |   | \$20,000.00                        |
| 20. | Work in progress<br>structure/truss - test fixture re Lynx.  |                                     |   |   | Unknown                            |
| 21. | Finished goods, including goods held for resale  |                                     |   |   |                                    |
| 22. | Other inventory or supplies<br>Propulsion System - 40k Test Stand - in need of extensive upgrades. |                                     |   |   | \$1,500.00                         |

## 23. Total of Part 5.

Add lines 19 through 22. Copy the total to line 84.

**\$21,500.00**

## 24. Is any of the property listed in Part 5 perishable?

- ☒ No  
☐ Yes

## 25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No  
☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

## 26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

## 27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

## 38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

|     | General description                                 | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|-----|---|---|---|------------------------------------|
| 39. | Office furniture<br>Desks, furniture, office chairs |   |   | \$2,500.00                         |

Debtor XCOR Aerospace, Inc., a California Corporation Case number (if known) \_\_\_\_\_  
Name

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software  
Computers, software \$2,500.00

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7. \$5,000.00  
Add lines 39 through 42. Copy the total to line 86.

44. Is a depreciation schedule available for any of the property listed in Part 7?

☐ No  
☒ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

| General description<br>Include year, make, model, and identification numbers<br>(i.e., VIN, HIN, or N-number) | Net book value of<br>debtor's interest<br>(Where available) | Valuation method used<br>for current value | Current value of<br>debtor's interest |
|---|---|--|---------------------------------------|
|---|---|--|---------------------------------------|

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1. Motorcycle - 2010 Triumph VIN#: 1G9BU11186R289407  
Modified with expirimental bearings. \$3,000.00

47.2. Trailer - 2006 Carrier VIN#: 1G9BU11186R289407 - Converted to  
Test Stand \$1,000.00

47.3. Trailer - 2011 Carrier VIN#: 4HXSU1017BC154783 - Converted to  
Test Stand \$1,000.00

47.4. Trailer - 2012 Carrier VIN#: 4HXSU1410CC159982 - Converted to  
Test Stand \$1,000.00

47.5. Trailer - 2012 Carrier VIN#: 4HXHD182XCC159999 - Converted to  
Test Stand \$1,000.00

|        |  |                        |             |
|--------|--|------------------------|-------------|
| Debtor | <b>XCOR Aerospace, Inc., a California Corporation</b>  | Case number (If known) |             |
|        | Name   |                        |             |
| 47.6.  | Trailer - 2012 Carrier VIN#<br>:4HXHD1128CC160708 - Converted to<br>Test Stand   |                        | \$1,000.00  |
| 47.7.  | Trailer - 2002 Carrier VIN #<br>4HXSC16282C045655<br>Converted to a test stand   |                        | \$1,000.00  |
| 47.8.  | LSG/Cattle 2003 Ford VIN #<br>1FDNF20F0XED34199<br>non-operational   |                        | Unknown     |
| 47.9.  | Imperial Lowboy - 2006 VIN #<br>1T9FS162460372589  |                        | \$500.00    |
| 47.10  | Trailer - 2000 Carrier VIN #<br>4K2UF0719YM157985  |                        | \$500.00    |
| 47.11  | Trailer - 2006 Carson Carrier VIN #<br>4HXSU08116C05728  |                        | \$500.00    |
| 47.12  | Triple wide trailer/mobile home -<br>modified<br>(Mojave)  |                        | \$2,000.00  |
| 48.    | Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors,<br>floating homes, personal watercraft, and fishing vessels                                     |                        |             |
| 49.    | Aircraft and accessories   |                        |             |
| 49.1.  | Lynx MK1 Vehicle - Currently a work in<br>progress. \$25,000,000 - \$30,000,000<br>invested to date. Work needed to<br>complete the vehicle estimated at<br>\$15,000,000 - \$20,000,000. |                        | Unknown     |
| 49.2.  | EZ Rocket (Mojave) Tail No. N13EZ  |                        | Unknown     |
| 49.3.  | Rocket Racer (Midland) tail number<br>N216MR.  |                        | Unknown     |
| 50.    | Other machinery, fixtures, and equipment (excluding farm<br>machinery and equipment)<br>Equipment/Shop Equipment (Mojave +<br>Midland)<br>*Majority of equipment is leased.              |                        | \$10,000.00 |
|        | Two stainless steel heat treatment fixtures<br>located in Oregon (re treatment for lynx<br>doors).   |                        | Unknown     |

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Name

Case number (if known) \_\_\_\_\_

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$22,500.00**

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☐ No  
☒ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 9: Real property**

54. **Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.  
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

**Description and location of property**  
Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

**Nature and extent of debtor's interest in property**

**Net book value of debtor's interest (Where available)**

**Valuation method used for current value**

**Current value of debtor's interest**

55.1.

**2901 Enterprise Ln,  
Midland, TX 79706**

**Rent/Lease**

**\$0.00**

55.2.

**1314 Flight Line,  
Mojave, CA 93501**

**Rent/Lease**

**\$0.00**

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

**\$0.00**

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

- ☐ No  
☒ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.  
☒ Yes Fill in the information below.

**General description**

**Net book value of debtor's interest (Where available)**

**Valuation method used for current value**

**Current value of debtor's interest**

60. **Patents, copyrights, trademarks, and trade secrets**  
**Various Patents and Trademarks**

**Unknown**



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Name

61. Internet domain names and websites  
62. Licenses, franchises, and royalties  
63. Customer lists, mailing lists, or other compilations  
64. Other intangibles, or intellectual property  
Intellectual Property (est.) Retained Earnings \$10,000.00

65. Goodwill  
Goodwill value Unknown

66. Total of Part 10. \$10,000.00  
Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?  
☒ No  
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?  
☒ No  
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?  
☒ No  
☐ Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?  
Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.  
☒ Yes Fill in the information below.

Current value of  
debtor's interest

71. Notes receivable  
Description (include name of obligor)  
SXC Space Travel BV Note 518,599.19 - 0.00 = \$518,599.19  
Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)  
Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit  
has been filed)

75. Other contingent and unliquidated claims or causes of action of  
every nature, including counterclaims of the debtor and rights to  
set off claims

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed Examples: Season tickets,  
country club membership

Debtor XCOR Aerospace, Inc., a California Corporation  
Name

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78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

|                         |
|-------------------------|
| <div>\$518,599.19</div> |
|-------------------------|

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

Debtor XCOR Aerospace, Inc., a California Corporation  
Name

Case number (if known) \_\_\_\_\_

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

| Type of property  | Current value of personal property | Current value of real property |
|---|------------------------------------|--------------------------------|
| 80. Cash, cash equivalents, and financial assets.<br>Copy line 5, Part 1                  | \$1,424.66                         |                                |
| 81. Deposits and prepayments. Copy line 9, Part 2.  | \$90,132.38                        |                                |
| 82. Accounts receivable. Copy line 12, Part 3.  | \$437,467.98                       |                                |
| 83. Investments. Copy line 17, Part 4.  | \$0.00                             |                                |
| 84. Inventory. Copy line 23, Part 5.  | \$21,500.00                        |                                |
| 85. Farming and fishing-related assets. Copy line 33, Part 6.                             | \$0.00                             |                                |
| 86. Office furniture, fixtures, and equipment; and collectibles.<br>Copy line 43, Part 7. | \$5,000.00                         |                                |
| 87. Machinery, equipment, and vehicles. Copy line 51, Part 8.                             | \$22,500.00                        |                                |
| 88. Real property. Copy line 56, Part 9.....>   |                                    | \$0.00                         |
| 89. Intangibles and intellectual property. Copy line 66, Part 10.                         | \$10,000.00                        |                                |
| 90. All other assets. Copy line 78, Part 11.  | + \$518,599.19                     |                                |
| 91. Total. Add lines 80 through 90 for each column  | \$1,106,624.21                     | + 91b. \$0.00                  |
| 92. Total of all property on Schedule A/B. Add lines 91a+91b=92                           |                                    | \$1,106,624.21                 |

Fill in this information to identify the case:

Debtor name XCOR Aerospace, Inc., a California Corporation

United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

| Column A                               | Column B                                     |
|--|--|
| Amount of claim                        | Value of collateral that supports this claim |
| Do not deduct the value of collateral. |  |
| <b>\$1,561.55</b>                      |  |

**2.1 Bryn Mawr Funding**

Creditor's Name

**620 West Germantown Pike  
#310  
Plymouth Meeting, PA  
19462**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**UCC-1 Filed 10/16/15**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☒ No
- ☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Security interest in personal property**

Describe the lien

**Financing Statement**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.2 BSB Leasing**

Creditor's Name

**PO Box 2149  
Gig Harbor, WA 98335**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

**\$2,372.64**

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply



Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if know) \_\_\_\_\_

Name

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.3 Cedra Capital**

Creditor's Name

**3420 Bristol St.  
Suite 600  
Costa Mesa, CA 92626**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Security interest in certain leased equipment**

**\$42,421.45**

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.4 De Lage Landen Financial Services, Inc.**

Creditor's Name

**1111 Old Eagle School Rd.  
Wayne, PA 19087**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Alternate Address**

**\$0.00**

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.5 DeLage Landen Financial Services, Inc**

Creditor's Name

**PO Box 41602  
Philadelphia, PA 19101**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**Security interest in ceratin leased equipment**

**\$3,261.02**

Describe the lien

**Financing Statement**

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if know) \_\_\_\_\_

Name

Creditor's email address, if known

Date debt was incurred

**UCC-1 Filed 5/7/15**

Last 4 digits of account number

**5464**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.6 Intech Funding Corp**

Creditor's Name

**PO Box 790448****Saint Louis, MO 63179**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**UCC-1 Filed 5/18/15, 7/29/15**

Last 4 digits of account number

**4000**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Security interest in certain personal property equipment.****\$5,395.00**

Describe the lien

**Financing Statement**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.7 Intech Funding Corp**

Creditor's Name

**201 East Huntington Drive****Suite 201****Monrovia, CA 91016**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Alternate Address****\$0.00**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if know)

Name

**2.8 LEAF Capital Funding**

Creditor's Name

**PO Box 644006  
Cincinnati, OH 45264**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**UCC-1 filed 5/14/15, 6/30/15**

Last 4 digits of account number

**0956**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Secured by office furniture and equipment****\$835.03**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.9 LEAF Capital Funding LLC and/or assigns**

Creditor's Name

**2005 Market Street  
14th Floor  
Philadelphia, PA 19103**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Alternate Address****\$0.00**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.1 Midland County Tax Collector**

Creditor's Name

**2110 North A Street  
Midland, TX 79705**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Describe debtor's property that is subject to a lien

**Property Taxes****\$0.00**

Describe the lien

**An agreement you made (such as mortgage or secured car loan)**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if know) \_\_\_\_\_

Name

Last 4 digits of account number \_\_\_\_\_

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
1**Mintaka Financial, LLC**

Creditor's Name

**P.O. Box 2149  
Gig Harbor, WA 98335**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**UCC-1 Filed 6/8/15**

Last 4 digits of account number \_\_\_\_\_

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Security interest in certain personal property including dryer, compressor, loan trailers, etc.****\$0.00**

Describe the lien

**Financing Statement**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
2**RPM Innovations Inc.**

Creditor's Name

**333 Concourse Dr.  
Rapid City, SD 57703**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**UCC-1 Filed 12/16/15**

Last 4 digits of account number \_\_\_\_\_

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Security interest in personal property****\$245,567.43**

Describe the lien

**Financing Statement**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
3**Siemens Financial  
Services, Inc.**

Describe debtor's property that is subject to a lien

**\$0.00****\$0.00**



Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if know) \_\_\_\_\_

Name

Creditor's Name

**170 Wood Avenue  
Iselin, NJ 08830**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**UCC-1 Filed 5/18/15, 7/14/15  
Last 4 digits of account number**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Assignee of Intech UCC

Describe the lien

**Financing Statement**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
4**Space Florida**

Creditor's Name

**P.O. Box 656  
Cape Canaveral, FL  
32920-0656**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**\$0.00**

Alternate Address

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
5**Space Florida**

Creditor's Name

**505 Odyssey Way  
Suite 300  
Merritt Island, FL 32953**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Describe debtor's property that is subject to a lien

**\$0.00**

Alternate Address

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Debtor **XCOR Aerospace, Inc., a California Corporation**  
Name

Case number (if know)

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed2.1  
6**Space Florida**

Creditor's Name

**MS: SPFL****Bldg: M6-306; Room 9030  
Kennedy Space Center, FL  
32899**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**UCC-1 Filed 6/24/15, 7/2/15,  
7/16/15 (TX)**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**\$3,559,342.47****Blanket security interest in personal property**

Describe the lien

**Financing Statement**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed2.1  
7**Webbank**

Creditor's Name

**6440 S. Wasatch Blvd., Ste.  
300****Salt Lake City, UT 84121**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**UCC-1 Filed 7/7/14**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**\$0.00****Security interest in computer equipment**

Describe the lien

**Financing Statement**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$3,860,756.59****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

Debtor XCOR Aerospace, Inc., a California Corporation

Case number (if know) \_\_\_\_\_

Name

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

| Name and address | On which line in Part 1 did you enter the related creditor? | Last 4 digits of account number for this entity |
|------------------|---|---|
| _____            |   |   |

Fill in this information to identify the case:

Debtor name **XCOR Aerospace, Inc., a California Corporation**United States Bankruptcy Court for the: **EASTERN DISTRICT OF CALIFORNIA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

|     |   | Total claim  | Priority amount |
|-----|---|--|-----------------|
| 2.1 | Priority creditor's name and mailing address<br><b>California Attorney General</b><br><b>PO Box 944255</b><br><b>Sacramento, CA 94244-2550</b>        | As of the petition filing date, the claim is:<br><i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed | <b>\$0.00</b>   |
|     | Date or dates debt was incurred<br><br>Last 4 digits of account number<br>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | Basis for the claim:<br><br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes  |                 |
| 2.2 | Priority creditor's name and mailing address<br><b>California Board of Equalization</b><br><b>P.O. Box 942879 MIC: 29</b><br><b>CA 92479</b>          | As of the petition filing date, the claim is:<br><i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed | <b>\$0.00</b>   |
|     | Date or dates debt was incurred<br><br>Last 4 digits of account number<br>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | Basis for the claim:<br><br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes  |                 |



|        |   |                        |
|--------|---|------------------------|
| Debtor | <b>XCOR Aerospace, Inc., a California Corporation</b> | Case number (if known) |
|        | Name  |                        |

  

|     |  |  |                 |
|-----|--|--|-----------------|
| 2.3 | Priority creditor's name and mailing address<br><b>California Franchise Tax Board<br/>                 Bankruptcy Unit - G11<br/>                 PO Box 2952<br/>                 Sacramento, CA 95812-2952</b> | As of the petition filing date, the claim is:<br><i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed | <b>\$823.00</b> |
|     | Date or dates debt was incurred<br><br>Last 4 digits of account number<br>Specify Code subsection of PRIORITY<br>unsecured claim: 11 U.S.C. § 507(a) (8)   | Basis for the claim:<br><br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes  |                 |

  

|     |  |  |                 |
|-----|--|--|-----------------|
| 2.4 | Priority creditor's name and mailing address<br><b>Deschutes County Tax Collector<br/>                 1300 NW Wall St.<br/>                 Suite 200<br/>                 Bend, OR 97703</b> | As of the petition filing date, the claim is:<br><i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed | <b>\$495.08</b> |
|     | Date or dates debt was incurred<br><br>Last 4 digits of account number<br>Specify Code subsection of PRIORITY<br>unsecured claim: 11 U.S.C. § 507(a) (8)                                       | Basis for the claim:<br><b>Personal Property Taxes</b><br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes                                |                 |

  

|     |   |  |               |
|-----|---|--|---------------|
| 2.5 | Priority creditor's name and mailing address<br><b>Employment Development<br/>                 Department<br/>                 Bankruptcy Special Procedures<br/>                 Group<br/>                 PO Box 826880 MIC 92E<br/>                 Sacramento, CA 94280-0092</b> | As of the petition filing date, the claim is:<br><i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed | <b>\$0.00</b> |
|     | Date or dates debt was incurred<br><br>Last 4 digits of account number<br>Specify Code subsection of PRIORITY<br>unsecured claim: 11 U.S.C. § 507(a) (8)  | Basis for the claim:<br><br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes  |               |

  

|     |   |  |               |
|-----|---|--|---------------|
| 2.6 | Priority creditor's name and mailing address<br><b>Internal Revenue Service<br/>                 Centralized Insolvency Operation<br/>                 PO Box 7346<br/>                 Philadelphia, PA 19101-7346</b> | As of the petition filing date, the claim is:<br><i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed | <b>\$0.00</b> |
|     | Date or dates debt was incurred<br><br>Last 4 digits of account number<br>Specify Code subsection of PRIORITY<br>unsecured claim: 11 U.S.C. § 507(a) (8)  | Basis for the claim:<br><br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes  |               |

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known)

Name

2.7 Priority creditor's name and mailing address  
**Kern County Treasurer-Tax Collector**  
**1115 Truxton Avenue 2nd Floor**  
**Bakersfield, CA 93301-4639**

As of the petition filing date, the claim is:

**\$11,842.47**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

**Unsecured Property Taxes**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

2.8 Priority creditor's name and mailing address  
**Securities & Exchange Commission**  
**Attn: Bankruptcy Counsel**  
**5670 Wilshire Blvd., Fl 11**  
**Los Angeles, CA 90036**

As of the petition filing date, the claim is:

**\$0.00**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

2.9 Priority creditor's name and mailing address  
**Texas Attorney General**  
**PO Box 12548**  
**Austin, TX 78711-2548**

As of the petition filing date, the claim is:

**\$0.00**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

2.10 Priority creditor's name and mailing address  
**Texas Franchise Tax**  
**Texas Comptroller of Public Accounts**  
**P.O. Box 13528, Capitol Station**  
**Austin, TX 78711-3528**

As of the petition filing date, the claim is:

**\$204.00**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

**sales tax**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

Debtor **XCOR Aerospace, Inc., a California Corporation**  
Name

Case number (if known)

2.11 Priority creditor's name and mailing address  
**United States Attorney (IRS Division)**  
**2500 Tulare St Ste 404**  
**Fresno, CA 93721**

As of the petition filing date, the claim is:  
*Check all that apply.*  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$0.00**

Date or dates debt was incurred

Basis for the claim:  
**Is this Address Correct?**

Last 4 digits of account number

Specify Code subsection of PRIORITY  
 unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

☒ No  
☐ Yes

2.12 Priority creditor's name and mailing address  
**United States Department of Justice**  
**Box 683, Ben Franklin Station**  
**Washington, DC 20044**

As of the petition filing date, the claim is:  
*Check all that apply.*  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$0.00**

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Specify Code subsection of PRIORITY  
 unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

☒ No  
☐ Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1 Nonpriority creditor's name and mailing address  
**Act Aerospace**  
**425 E 400 North P.O. Box 9**  
**Gunnison, UT 84634**  
 Date(s) debt was incurred \_\_\_\_  
 Last 4 digits of account number 0890

As of the petition filing date, the claim is: *Check all that apply.*  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

Amount of claim

**\$90,676.52**

3.2 Nonpriority creditor's name and mailing address  
**AERO Pro, LLC**  
**225 S Leland Norton Way**  
**San Bernardino, CA 92408**  
 Date(s) debt was incurred \_\_\_\_  
 Last 4 digits of account number 5234

As of the petition filing date, the claim is: *Check all that apply.*  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes**\$10,734.10**

3.3 Nonpriority creditor's name and mailing address  
**AFCO**  
**PO Box 887200**  
**Los Angeles, CA 90088**  
 Date(s) debt was incurred \_\_\_\_  
 Last 4 digits of account number 6606

As of the petition filing date, the claim is: *Check all that apply.*  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes**\$141.09**

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

|      |  |   |
|------|--|---|
| 3.4  | <b>Nonpriority creditor's name and mailing address</b><br><b>AIG</b><br><b>Christina Montez</b><br><b>1 Montgomery Street</b><br><b>Suite 2500</b><br><b>San Francisco, CA 94104</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____ | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$39,484.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                          |
| 3.5  | <b>Nonpriority creditor's name and mailing address</b><br><b>Airgas, USA, LLC (Mojave)</b><br><b>PO Box 7423</b><br><b>Pasadena, CA 91109</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <b>4681</b>                                  | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$9,788.33</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                           |
| 3.6  | <b>Nonpriority creditor's name and mailing address</b><br><b>Airgas, USA, LLC (Midland)</b><br><b>PO Box 676015</b><br><b>Dallas, TX 75267</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <b>4681</b>                                 | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$144.21</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                             |
| 3.7  | <b>Nonpriority creditor's name and mailing address</b><br><b>Alan Darush</b><br><b>20410 via Botticelli</b><br><b>Porter Ranch, CA 91326</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____   | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$50,000.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim: short term note</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                |
| 3.8  | <b>Nonpriority creditor's name and mailing address</b><br><b>Amalgamated Financial Group</b><br><b>PO Box 1006</b><br><b>Oak Bridge, NJ 08857-1006</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____                               | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$0.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim: Collecting for FedEx Freight (0640)</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.9  | <b>Nonpriority creditor's name and mailing address</b><br><b>Amazon</b><br><b>PO Box 530958</b><br><b>Atlanta, GA 30353</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <b>6194</b>  | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$367.50</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                             |
| 3.10 | <b>Nonpriority creditor's name and mailing address</b><br><b>Andrews Consulting Services, LLC</b><br><b>4 Weems Lane #209</b><br><b>Winchester, VA 22601</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____                         | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$10,000.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                          |



Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

|      |   |  |                    |
|------|---|--|--------------------|
| 3.11 | <b>Nonpriority creditor's name and mailing address</b><br><b>Aon Risk Solutions</b><br><b>PO Box 518, 3000 AM Rotterdam</b><br><b>Admiraliteitskade 62, 3063 ED Rotterdam</b><br><b>The Netherlands</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____ | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                       | <b>\$589.00</b>    |
| 3.12 | <b>Nonpriority creditor's name and mailing address</b><br><b>AT&amp;T (Mojave)</b><br><b>PO Box 5025</b><br><b>Carol Stream, IL 60197</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>3576</u>  | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                       | <b>\$4,829.60</b>  |
| 3.13 | <b>Nonpriority creditor's name and mailing address</b><br><b>Barrday Composite Solutions</b><br><b>PO Box 931893</b><br><b>Hapeville, GA 31193</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>0029</u>   | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                       | <b>\$19,650.00</b> |
| 3.14 | <b>Nonpriority creditor's name and mailing address</b><br><b>Benz Inc.</b><br><b>Mojave Sanitation PO Box 1750</b><br><b>Tehachapi, CA 93581</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____  | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                       | <b>\$1,438.46</b>  |
| 3.15 | <b>Nonpriority creditor's name and mailing address</b><br><b>Blok &amp; van den Boogaard Register</b><br><b>Keizersgracht 523</b><br><b>1017 DP Amsterdam</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____   | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                       | <b>\$937.50</b>    |
| 3.16 | <b>Nonpriority creditor's name and mailing address</b><br><b>Blok &amp; Van Den Booogaard</b><br><b>Herengracht 472</b><br><b>1017 CA Amsterdam, Netherlands</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____  | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> <u>For Notice Purposes</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$0.00</b>      |
| 3.17 | <b>Nonpriority creditor's name and mailing address</b><br><b>Blue Cross Blue Shield</b><br><b>Health Care Service Corp</b><br><b>PO Box 731428</b><br><b>Dallas, TX 75373</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>9865</u>                    | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                       | <b>\$642.03</b>    |

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

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| 3.18 | <b>Nonpriority creditor's name and mailing address</b><br><b>Bodycote Westminster Division</b><br><b>7474 Garden Grove Blvd</b><br><b>Westminster, CA 92683</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>6400</u>            | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$955.20</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes   |
| 3.19 | <b>Nonpriority creditor's name and mailing address</b><br><b>Boydston Pest Control</b><br><b>1601 N Big Spring ST</b><br><b>Midland, TX 79701</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____                                | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$81.19</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  |
| 3.20 | <b>Nonpriority creditor's name and mailing address</b><br><b>Certent, Inc</b><br><b>4683 Chabot Drive</b><br><b>Suite 260</b><br><b>Pleasanton, CA 94588</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____                     | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$8,348.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                       |
| 3.21 | <b>Nonpriority creditor's name and mailing address</b><br><b>City of Midland</b><br><b>PO Box 1152</b><br><b>Midland, TX 79702</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>0602</u>   | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$67.85</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  |
| 3.22 | <b>Nonpriority creditor's name and mailing address</b><br><b>Commercial Spaceflight Federation</b><br><b>727 15 Street NW</b><br><b>Suite 800</b><br><b>Washington, DC 20005</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____ | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$13,000.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                      |
| 3.23 | <b>Nonpriority creditor's name and mailing address</b><br><b>Corporate Intelligence Services</b><br><b>325 Hammond Drive Suite 114</b><br><b>Atlanta, GA 30328</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____               | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$0.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> <u>Collection for Airgas, USA, LLC (Mojave)</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.24 | <b>Nonpriority creditor's name and mailing address</b><br><b>Cosworth Limited</b><br><b>St. James Mill Rd</b><br><b>Northamptonshre</b><br><b>NN5 5RA United Kingdom</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____         | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$8,397.70</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                       |

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

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|------|--|---|--------------------|
| 3.25 | Nonpriority creditor's name and mailing address<br><b>Credence Resource Management, LLC</b><br><b>17000 Dallas Parkway Suite 204</b><br><b>Dallas, TX 75248</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____                                  | As of the petition filing date, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: <u>Collection for AT&amp;T (Mojave)</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$0.00</b>      |
| 3.26 | Nonpriority creditor's name and mailing address<br><b>CSC Trust Company of Delaware</b><br><b>One Little Falls Centre</b><br><b>2711 Centerville Road Ste 220</b><br><b>Wilmington, DE 19808</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                    | <b>\$96.12</b>     |
| 3.27 | Nonpriority creditor's name and mailing address<br><b>Dan Klores Communications, LLC</b><br><b>261 Fifth Ave</b><br><b>New York, NY 10016</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____  | As of the petition filing date, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                    | <b>\$25,176.17</b> |
| 3.28 | Nonpriority creditor's name and mailing address<br><b>Desert Truck Service</b><br><b>1426 Hwy 58</b><br><b>Mojave, CA 93501</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>7920</u>   | As of the petition filing date, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                    | <b>\$45.63</b>     |
| 3.29 | Nonpriority creditor's name and mailing address<br><b>DIAB Americas LP</b><br><b>Dept 2299</b><br><b>PO Box 122299</b><br><b>Dallas, TX 75312</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____  | As of the petition filing date, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                    | <b>\$7,712.48</b>  |
| 3.30 | Nonpriority creditor's name and mailing address<br><b>DMV</b><br><b>PO Box 942897</b><br><b>Sacramento, CA 94297</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____   | As of the petition filing date, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                    | <b>\$464.00</b>    |
| 3.31 | Nonpriority creditor's name and mailing address<br><b>Dun &amp; Bradstreet Credibility Corp</b><br><b>PO Box 742138</b><br><b>Los Angeles, CA 90074</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>9811</u>                                   | As of the petition filing date, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                    | <b>\$1,599.00</b>  |

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

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|-------------|--|--|---------------------|
| <b>3.32</b> | <b>Nonpriority creditor's name and mailing address</b><br><b>E V Roberts</b><br><b>18027 Bishop Avenue</b><br><b>Carson, CA 90746</b><br><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____  | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                  | <b>\$4,640.23</b>   |
| <hr/>       |  |  |                     |
| <b>3.33</b> | <b>Nonpriority creditor's name and mailing address</b><br><b>Eastern Kern Air Pollution Control Dist</b><br><b>2700 "M" Street Ste 302</b><br><b>Bakersfield, CA 93301</b><br><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>1001</u> | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                  | <b>\$138.00</b>     |
| <hr/>       |  |  |                     |
| <b>3.34</b> | <b>Nonpriority creditor's name and mailing address</b><br><b>Esther Dyson</b><br><b>632 Broadway</b><br><b>10th Floor</b><br><b>New York, NY 10012</b><br><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____                           | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim:</b> <u>short term note</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$223,000.00</b> |
| <hr/>       |  |  |                     |
| <b>3.35</b> | <b>Nonpriority creditor's name and mailing address</b><br><b>FedEx Freight</b><br><b>PO Box 660481</b><br><b>Dallas, TX 75266</b><br><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>0640</u>  | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                  | <b>\$125.62</b>     |
| <hr/>       |  |  |                     |
| <b>3.36</b> | <b>Nonpriority creditor's name and mailing address</b><br><b>FedEx Freight</b><br><b>Dep LA PO Box 21415</b><br><b>Pasadena, CA 91185</b><br><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>7336,9164</u>                             | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                  | <b>\$2,103.67</b>   |
| <hr/>       |  |  |                     |
| <b>3.37</b> | <b>Nonpriority creditor's name and mailing address</b><br><b>Florida Deparment of Revenue</b><br><b>5050 W Tennessee St</b><br><b>Tallahassee, FL 32399</b><br><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____                      | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                  | <b>\$278.80</b>     |
| <hr/>       |  |  |                     |
| <b>3.38</b> | <b>Nonpriority creditor's name and mailing address</b><br><b>Gande Communications Network</b><br><b>Dept 1204</b><br><b>PO Box 121204</b><br><b>Dallas, TX 75312</b><br><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>4748</u>       | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                  | <b>\$9,630.25</b>   |

Debtor XCOR Aerospace, Inc., a California Corporation  
Name

Case number (if known) \_\_\_\_\_

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| 3.39 | Nonpriority creditor's name and mailing address<br><b>GoEngineer, Inc</b><br><b>1787 East Ft Union Blvd</b><br><b>Suite 10</b><br><b>Cottonwood Heights, UT 84121</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>6735</u>       | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,108.73</u><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                          |
| 3.40 | Nonpriority creditor's name and mailing address<br><b>Gray Robinson Attorneys at Law</b><br><b>P.O. Box 3068</b><br><b>Orlando, FL 32802-3068</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____                                 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: <u>Attorneys For Space Florida</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.41 | Nonpriority creditor's name and mailing address<br><b>Gunderson Palmer Nelson Ashmore LLP</b><br><b>P.O. Box 8045</b><br><b>Rapid City, SD 57709</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____                              | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                              |
| 3.42 | Nonpriority creditor's name and mailing address<br><b>Home Depot Credit Services</b><br><b>Dept 32 - 2536353034</b><br><b>PO Box 9001043</b><br><b>Louisville, KY 40290</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>3034</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$35.00</u><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                             |
| 3.43 | Nonpriority creditor's name and mailing address<br><b>InContact</b><br><b>Payment Center #5450</b><br><b>PO Box 410468</b><br><b>Salt Lake City, UT 84141</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>4871</u>               | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$39.65</u><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                             |
| 3.44 | Nonpriority creditor's name and mailing address<br><b>Indian Wells</b><br><b>2565 State Highway 14</b><br><b>Inyokern, CA 93527</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>2060</u>   | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$249.75</u><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                            |
| 3.45 | Nonpriority creditor's name and mailing address<br><b>Intech Funding Corp</b><br><b>PO Box 2083</b><br><b>Carol Stream, IL 60100</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>4000</u>  | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$13,089.20</u><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                         |



Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

|      |  |   |                     |
|------|--|---|---------------------|
| 3.46 | <b>Nonpriority creditor's name and mailing address</b><br><b>Intertrust</b><br><b>Prins Bernhardplein 200</b><br><b>1097 JB Amsterdam</b><br><b>The Netherlands</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____  | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                               | <b>\$5,000.00</b>   |
| 3.47 | <b>Nonpriority creditor's name and mailing address</b><br><b>IPFS</b><br><b>PO Box 412086</b><br><b>Kansas City, MO 64141</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>1059,9665</u>   | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                               | <b>\$1,755.87</b>   |
| 3.48 | <b>Nonpriority creditor's name and mailing address</b><br><b>Jamshid Azari &amp; Barbara Colbert</b><br><b>1440 - 19 St</b><br><b>Manhattan Beach, CA 90266</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____  | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> <u>short term note</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes              | <b>\$10,000.00</b>  |
| 3.49 | <b>Nonpriority creditor's name and mailing address</b><br><b>John H. Gibson II</b><br><b>2901 Enterprise Lane</b><br><b>Midland, TX 79706</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____  | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> <u>Director Loan to corporation</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>Unknown</b>      |
| 3.50 | <b>Nonpriority creditor's name and mailing address</b><br><b>Jordan Kaufman Kern County Unsec</b><br><b>PropTax</b><br><b>KCTTC</b><br><b>Payment Center</b><br><b>PO Box 541004</b><br><b>Los Angeles, CA 90054</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____ | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                               | <b>\$10,537.66</b>  |
| 3.51 | <b>Nonpriority creditor's name and mailing address</b><br><b>Kern County Public Health Services Dept</b><br><b>Environmental Health Div</b><br><b>2700 M Street, Suite 300</b><br><b>Bakersfield, CA 93301</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>5733</u> | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                               | <b>\$410.00</b>     |
| 3.52 | <b>Nonpriority creditor's name and mailing address</b><br><b>Kevin Greene</b><br><b>6755 Matardo Drive</b><br><b>Las Vegas, NV 89103</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____   | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> <u>short term note</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes              | <b>\$100,000.00</b> |

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

3.53 Nonpriority creditor's name and mailing address

**Laser Technology Associates**  
**28 Charles Street**  
**Tolland, CT 06084**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number 0901

As of the petition filing date, the claim is: Check all that apply.

\$14,146.38

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.54 Nonpriority creditor's name and mailing address

**Laura Collins**  
**2901 Enterprise Lane**  
**Midland, TX 79706**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

Unknown

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Officer Loan to corporationIs the claim subject to offset? ☒ No ☐ Yes

3.55 Nonpriority creditor's name and mailing address

**Lee Valentine**  
**13162 Cheltenham Drive**  
**Sherman Oaks, CA 91423**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$110,000.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: short term noteIs the claim subject to offset? ☒ No ☐ Yes

3.56 Nonpriority creditor's name and mailing address

**Liberty Mutual Insurance**  
**PO Box 85834**  
**San Diego, CA 92186**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$248.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.57 Nonpriority creditor's name and mailing address

**Linde LLC**  
**200 Somerset Corporate**  
**Bldg Suite 7000**  
**Bridgewater, NJ 08807**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number 0280

As of the petition filing date, the claim is: Check all that apply.

\$7,099.22

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.58 Nonpriority creditor's name and mailing address

**Lux Bus America, Co**  
**851 E Cerritos Ave**  
**Anaheim, CA 92805**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number OR01

As of the petition filing date, the claim is: Check all that apply.

\$2,218.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.59 Nonpriority creditor's name and mailing address

**Manresa Investment LLC**  
**c/o Garrett Paul**  
**360 Marin Ave.**  
**Mill Valley, CA 94941**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$1,500,000.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Unsecured loanIs the claim subject to offset? ☒ No ☐ Yes

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|--|--|------------------------------|--|
| Debtor <b>XCOR Aerospace, Inc., a California Corporation</b> |  | Case number (if known) _____ |  |
| Name _____   |  |                              |  |

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|------|---|--|---------------|
| 3.60 | <b>Nonpriority creditor's name and mailing address</b><br><b>Manresa Investment LLC</b><br><b>c/o Kaper Ventures Limited</b><br><b>2/F., West Block 21</b><br><b>NO. 481 Gui Ping Rd, Xu Hui District</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____ | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim: <u>Alternate address</u></b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$0.00</b> |
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| 3.61 | <b>Nonpriority creditor's name and mailing address</b><br><b>Matrix Composites, Inc</b><br><b>275 Barnes Blvd</b><br><b>Rockledge, FL 32955</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>LNS1</u> | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim: _____</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$25,000.00</b> |
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| 3.62 | <b>Nonpriority creditor's name and mailing address</b><br><b>McDermott Will &amp; Emery LLP</b><br><b>PO Box 6043</b><br><b>Chicago, IL 60680</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>8917</u> | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim: _____</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$41,526.43</b> |
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| 3.63 | <b>Nonpriority creditor's name and mailing address</b><br><b>Michael A. Blum</b><br><b>2212 Glen Brook Way</b><br><b>Las Vegas, NV 89117</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____ | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim: _____</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$3,000.00</b> |
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| 3.64 | <b>Nonpriority creditor's name and mailing address</b><br><b>Midland Development Corporation</b><br><b>200 N Loraine St Suite 610</b><br><b>Midland, TX 79701</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____ | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim: _____</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$30,000.00</b> |
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| 3.65 | <b>Nonpriority creditor's name and mailing address</b><br><b>Midland Development Corporation</b><br><b>MDC Chairman</b><br><b>City of Midland</b><br><b>PO Box 1152</b><br><b>Midland, TX 79702</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____ | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim: _____</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$10,000,000.00</b> |
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| 3.66 | <b>Nonpriority creditor's name and mailing address</b><br><b>Mojave Air &amp; Space Port</b><br><b>1434 Flightline</b><br><b>Mojave, CA 93501</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>2355</u> | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim: _____</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$51,421.39</b> |
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Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

|       |   |  |                       |
|-------|---|--|-----------------------|
| 3.67  | <b>Nonpriority creditor's name and mailing address</b><br><b>Morgan, Lewis &amp; Bockius LLP</b><br><b>P.O. Box 79356</b><br><b>City of Industry, CA 91716</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>5300</u>  | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                      | <b>\$81,541.31</b>    |
| <hr/> |   |  |                       |
| 3.68  | <b>Nonpriority creditor's name and mailing address</b><br><b>New Allies International LTD.</b><br><b>Unit 5A, 22-24 Cameron Rd</b><br><b>Tsim Sha Tsui, Hong Kong</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____ | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> <u>Additional Address</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  | <b>\$0.00</b>         |
| <hr/> |   |  |                       |
| 3.69  | <b>Nonpriority creditor's name and mailing address</b><br><b>New Allies International, LTD.</b><br><b>PO Box 217</b><br><b>Apia, Simoa</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____                            | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                      | <b>\$1,500,000.00</b> |
| <hr/> |   |  |                       |
| 3.70  | <b>Nonpriority creditor's name and mailing address</b><br><b>PCC Structurals, Inc.</b><br><b>345 NE Hemlock Ave.</b><br><b>Redmond, OR 97756</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number _____                      | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> <u>For Notice Purposes</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$0.00</b>         |
| <hr/> |   |  |                       |
| 3.71  | <b>Nonpriority creditor's name and mailing address</b><br><b>Peer 1 Hosting</b><br><b>PO Box 643607</b><br><b>Cincinnati, OH 45264</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>9365</u>                          | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                      | <b>\$1,619.78</b>     |
| <hr/> |   |  |                       |
| 3.72  | <b>Nonpriority creditor's name and mailing address</b><br><b>Performance Sealing Inc</b><br><b>1821 Langley Ave</b><br><b>Irvine, CA 92614</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>2701</u>                  | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                      | <b>\$41,302.53</b>    |
| <hr/> |   |  |                       |
| 3.73  | <b>Nonpriority creditor's name and mailing address</b><br><b>Plateronics Processing</b><br><b>9164 Independence</b><br><b>Chatsworth, CA 91311</b><br>Date(s) debt was incurred _____<br>Last 4 digits of account number <u>0701</u>              | <b>As of the petition filing date, the claim is: Check all that apply.</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> _____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                      | <b>\$355.00</b>       |

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

|      |  |  |                    |
|------|--|--|--------------------|
| 3.74 | <b>Nonpriority creditor's name and mailing address</b><br><b>PoliSpace</b><br><b>4539 Seminary Rd</b><br><b>Alexandria, VA 22304</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____   | <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                | <b>\$37,253.63</b> |
| 3.75 | <b>Nonpriority creditor's name and mailing address</b><br><b>Protobox LLC</b><br><b>5717 Huberville Ave</b><br><b>Riverside, OH 45431</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____                                      | <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                | <b>\$31,125.92</b> |
| 3.76 | <b>Nonpriority creditor's name and mailing address</b><br><b>Quartus Engineering Inc.</b><br><b>10252 Vista Sorrento Parkway</b><br><b>San Diego, CA 92121</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____                 | <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                | <b>\$41,369.25</b> |
| 3.77 | <b>Nonpriority creditor's name and mailing address</b><br><b>Race Communications</b><br><b>1325 Howard Ave #604</b><br><b>Burlingame, CA 94010</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>0484</u>                      | <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                | <b>\$920.48</b>    |
| 3.78 | <b>Nonpriority creditor's name and mailing address</b><br><b>Randy Baker</b><br><b>2901 Enterprise Lane</b><br><b>Midland, TX 79706</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____  | <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> <u>Director Loan to corporation</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>Unknown</b>     |
| 3.79 | <b>Nonpriority creditor's name and mailing address</b><br><b>Rev Manufacturing, Inc</b><br><b>520 E Rancho Vista Blvd</b><br><b>Unit B</b><br><b>Palmdale, CA 93550</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>0101</u> | <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                | <b>\$12,364.00</b> |
| 3.80 | <b>Nonpriority creditor's name and mailing address</b><br><b>Robin Snelson</b><br><b>13162 Cheltenham Dr</b><br><b>Sherman Oaks, CA 91423</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____                                  | <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                | <b>\$14,200.00</b> |



Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

|      |   |  |
|------|---|--|
| 3.81 | <b>Nonpriority creditor's name and mailing address</b><br><b>Rogier Kroymans Kroy Mans Consultancy</b><br><b>Melkweg 26a</b><br><b>1251PS Laren</b><br><b>Nederland</b><br><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____               | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$6,000.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes   |
| 3.82 | <b>Nonpriority creditor's name and mailing address</b><br><b>Ronald Moreck</b><br><b>231 River Street</b><br><b>Forty Fort, PA 18704</b><br><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____  | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>Unknown</b><br><input checked="" type="checkbox"/> Contingent<br><input checked="" type="checkbox"/> Unliquidated<br><input checked="" type="checkbox"/> Disputed<br><br><b>Basis for the claim: Party to Lawsuit</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.83 | <b>Nonpriority creditor's name and mailing address</b><br><b>S &amp; M Moving Systems</b><br><b>PO Box 98355</b><br><b>Section 4444</b><br><b>Phoenix, AZ 85038</b><br><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>0503</u>            | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$3,500.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes   |
| 3.84 | <b>Nonpriority creditor's name and mailing address</b><br><b>Satoshi Takamatsu</b><br><b>Space Travel, Inc.</b><br><b>3-5-6 Kita Aoyama, Minato-Ku</b><br><b>Tokyo 107-0061 Japan</b><br><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____ | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$250,000.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim: Unsecured loan</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                               |
| 3.85 | <b>Nonpriority creditor's name and mailing address</b><br><b>Shook Hardy &amp; Bacon LLP</b><br><b>PO Box 843223</b><br><b>Kansas City, MO 64184</b><br><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____                                  | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$0.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim: Collecting for AIG</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                 |
| 3.86 | <b>Nonpriority creditor's name and mailing address</b><br><b>Siemens Financial Services, Inc</b><br><b>301 Lindenwood Dr</b><br><b>Suite 215</b><br><b>Malvern, PA 19355</b><br><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____          | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$0.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim: Collecting for Intech Funding Corp</b><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                 |
| 3.87 | <b>Nonpriority creditor's name and mailing address</b><br><b>Siemens Product Lifecycle Mgmt</b><br><b>60 Broadhollow Rd</b><br><b>Melville, NY 11747</b><br><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>5515</u>                       | <b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$37,130.00</b><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><br><b>Basis for the claim:</b> ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  |

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

|       |   |   |                     |
|-------|---|---|---------------------|
| 3.88  | Nonpriority creditor's name and mailing address<br><b>Sim Sanitation, Inc</b><br><b>PO Box 2418</b><br><b>Tehachapi, CA 93581</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____                         | As of the petition filing date, the claim is: <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes   | <b>\$400.45</b>     |
| <hr/> |   |   |                     |
| 3.89  | Nonpriority creditor's name and mailing address<br><b>Southern California Edison</b><br><b>PO Box 300</b><br><b>Rosemead, CA 91772</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>0702</u>             | As of the petition filing date, the claim is: <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes   | <b>\$1,089.75</b>   |
| <hr/> |   |   |                     |
| 3.90  | Nonpriority creditor's name and mailing address<br><b>Southwest Research Institute</b><br><b>6220 Culebra Rd</b><br><b>San Antonio, TX 78228</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>21JD</u>   | As of the petition filing date, the claim is: <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: <u>Termination of contract notice received by XCOR</u><br><u>7/16/2016</u><br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <b>\$50,000.00</b>  |
| <hr/> |   |   |                     |
| 3.91  | Nonpriority creditor's name and mailing address<br><b>Speciality Materials Inc.</b><br><b>P.O. Box 55155</b><br><b>Boston, MA 02205</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>3204</u>            | As of the petition filing date, the claim is: <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes   | <b>\$109,863.95</b> |
| <hr/> |   |   |                     |
| 3.92  | Nonpriority creditor's name and mailing address<br><b>Stroock &amp; Stroock &amp; Lavan LLP</b><br><b>1875 K Street NW</b><br><b>Washington, DC 20006</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes   | <b>\$18,215.50</b>  |
| <hr/> |   |   |                     |
| 3.93  | Nonpriority creditor's name and mailing address<br><b>Sun Life Financial</b><br><b>PO Box 807009</b><br><b>Kansas City, MO 64184</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>0001</u>               | As of the petition filing date, the claim is: <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes   | <b>\$1,568.16</b>   |
| <hr/> |   |   |                     |
| 3.94  | Nonpriority creditor's name and mailing address<br><b>Swift Engineering Inc.</b><br><b>1141-A Via Callejon</b><br><b>San Clemente, CA 92673</b><br>Date(s) debt was incurred ____<br>Last 4 digits of account number <u>0105</u>    | As of the petition filing date, the claim is: <i>Check all that apply.</i><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Basis for the claim: ____<br>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes   | <b>\$680,000.00</b> |

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

3.95 Nonpriority creditor's name and mailing address

**SXC N.V.**  
**Landhuis Joonchi**  
**Kaya Richard J. Beaujon Z/N**  
**PO Box 152 Willemstad, Curacao**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.***\$4,061,480.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **Unsecured loan**Is the claim subject to offset? ☒ No ☐ Yes

3.96 Nonpriority creditor's name and mailing address

**SXC N.V.**  
**PO Box 837**  
**Willemstad, Curacao**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.***\$2,261,000.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **Note payable**Is the claim subject to offset? ☒ No ☐ Yes

3.97 Nonpriority creditor's name and mailing address

**The SoCalGas**  
**PO Box C**  
**Monterey Park, CA 91756**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number **5876**As of the petition filing date, the claim is: *Check all that apply.***\$862.94**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.98 Nonpriority creditor's name and mailing address

**Tom Burbage**  
**8210 Newport Bay Passage**  
**Alpharetta, GA 30005**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.***\$55,500.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **short term note**Is the claim subject to offset? ☒ No ☐ Yes

3.99 Nonpriority creditor's name and mailing address

**Total Design Service**  
**8808 W CR 166**  
**Midland, TX 79706**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number **0601**As of the petition filing date, the claim is: *Check all that apply.***\$2,340.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.100 Nonpriority creditor's name and mailing address

**TXU Energy**  
**PO Box 650638**  
**Dallas, TX 75265**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number **5935**As of the petition filing date, the claim is: *Check all that apply.***\$5,900.72**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.101 Nonpriority creditor's name and mailing address

**Uniliver US**  
**800 Sylvan Ave.**  
**Englewood Cliffs, NJ 07632**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.***\$0.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **For notice purposes re winners of space travel tickets.**Is the claim subject to offset? ☒ No ☐ Yes

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known) \_\_\_\_\_

Name

3.102 Nonpriority creditor's name and mailing address

**UPS**  
**PO Box 894820**  
**Los Angeles, CA 90189**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number 7524

As of the petition filing date, the claim is: Check all that apply.

**\$53.78**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.103 Nonpriority creditor's name and mailing address

**US Bank Equipment Finance**  
**1310 Madrid St**  
**Marshall, MN 56258**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$0.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Collection for Intech Funding Corp (St Louis)Is the claim subject to offset? ☒ No ☐ Yes

3.104 Nonpriority creditor's name and mailing address

**US Trustee's Office**  
**United States Courthouse**  
**2500 Tulare Street, Room 1401**  
**Fresno, CA 93721**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$0.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: For Notice PurposesIs the claim subject to offset? ☒ No ☐ Yes

3.105 Nonpriority creditor's name and mailing address

**Wagner Machine Co**  
**PO Box 3969**  
**Champaign, IL 61826**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$21,579.33**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

3.106 Nonpriority creditor's name and mailing address

**Waller Lansden Dortch & Davis LLP**  
**Mark C. Taylor**  
**100 Congress Ave., Suite 1800**  
**Austin, TX 78701**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$0.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Attorneys for Space FloridaIs the claim subject to offset? ☒ No ☐ Yes

3.107 Nonpriority creditor's name and mailing address

**Williams Law Firm**  
**Holly B. Williams**  
**1209 W. Texas Ave.**  
**Midland, TX 79701**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$0.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Attorneys for Ronald MoreckIs the claim subject to offset? ☒ No ☐ Yes

3.108 Nonpriority creditor's name and mailing address

**XCOR Space Expeditions B.V.**  
**Gregory Elias, Landhuis Joonchi**  
**Kaya Richard J Beaujon z/n**  
**PO Box 837, Willemstad**  
**Curacao**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$782,725.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes

Debtor **XCOR Aerospace, Inc., a California Corporation**  
Name

Case number (if known)

3.109 Nonpriority creditor's name and mailing address  
**Yugenkaisya NOCCA**  
**101, 1-13-8, Oshiage, Sumida-Ku**  
**Tokyo, Japan**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$1,000,000.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **Unsecured loan**

Is the claim subject to offset? ☒ No ☐ Yes

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

| Total of claim amounts |                  |
|------------------------|------------------|
| 5a.                    | \$ 13,364.55     |
| 5b. +                  | \$ 23,586,429.01 |
| 5c.                    | \$ 23,599,793.56 |



Fill in this information to identify the case:

Debtor name XCOR Aerospace, Inc., a California Corporation

United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

# Official Form 206G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

### 1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

### 2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

Leases of large helium cylinders at both Midland and Mojave locations. Approx. \$75/month.

State the term remaining

List the contract number of any government contract \_\_\_\_\_

Airgas, USA, LLC  
PO Box 676015  
Dallas, TX 75267

2.2. State what the contract or lease is for and the nature of the debtor's interest

Lease of equipment storage cabinets. \$1,561.55/month.

State the term remaining

List the contract number of any government contract \_\_\_\_\_

Bryn Mawr Funding  
620 West Germantown Pike #310  
Plymouth Meeting, PA 19462

2.3. State what the contract or lease is for and the nature of the debtor's interest

Lease of office equipment/furnishings and certain tanks, filters, compressor, etc. \$2,115/month.

State the term remaining

List the contract number of any government contract \_\_\_\_\_

BSB Leasing  
PO Box 2149  
Gig Harbor, WA 98335

2.4. State what the contract or lease is for and the nature of the debtor's interest

Equipment lease dated August 2015. Payments are \$1,505.55/month.

State the term remaining

List the contract number of any government contract \_\_\_\_\_

Cedra Capital  
3420 Bristol St.  
Suite 600  
Costa Mesa, CA 92626

Debtor 1 **XCOR Aerospace, Inc., a California Corporation**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

## Additional Page if You Have More Contracts or Leases

### 2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **Lease of approx. 22,500 sq. ft. located at Midland International Airport. Rent is \$1,800 annually.**

State the term remaining

List the contract number of any government contract

**City of Midland  
Department of Airports  
PO Box 60305  
Midland, TX 79711**

2.6. State what the contract or lease is for and the nature of the debtor's interest **Lease of forklift located in Midland. Lease is \$738.85/month.**

State the term remaining

List the contract number of any government contract

**DeLage Landen Financial Services, Inc  
PO Box 41602  
Philadelphia, PA 19101**

2.7. State what the contract or lease is for and the nature of the debtor's interest **Lease of approx. 10,370 ft of Hanger No. 61 at Mojave airport. Rent is \$3,811 per month.**

State the term remaining

List the contract number of any government contract

**East Kern Airport District  
1341 Flight Line  
Mojave, CA 93501**

2.8. State what the contract or lease is for and the nature of the debtor's interest **Equipment leases ending in -2854 and -2394. Includes lighting, ethernet, programming systems, etc.**

State the term remaining

List the contract number of any government contract

**Intech Funding Corp  
PO Box 2083  
Carol Stream, IL 60100**

2.9. State what the contract or lease is for and the nature of the debtor's interest **Lease of office furniture. \$835.03/month.**

State the term remaining

List the contract number of any government contract

**LEAF Capital Funding  
PO Box 644006  
Cincinnati, OH 45264**

Debtor 1 **XCOR Aerospace, Inc., a California Corporation**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Additional Page if You Have More Contracts or Leases**

**2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.10. State what the contract or lease is for and the nature of the debtor's interest

**Economic Development Agreement re sublease of hanger space at Midland International Airport from Midland Development Corporation.**

State the term remaining

List the contract number of any government contract

**Midland Development Corporation  
MDC Chairman  
City of Midland  
PO Box 1152  
Midland, TX 79702**

2.11. State what the contract or lease is for and the nature of the debtor's interest

**Lease of the following:  
Hanger 61 = \$5,471.89/month,  
Acreage = \$1,394.00/month,  
Parking = \$140.39/month, Bunker 37 = \$296.63/month,  
Building 88H = \$105.00/month.**

State the term remaining

List the contract number of any government contract

**Mojave Air & Space Port  
1434 Flightline  
Mojave, CA 93501**

Fill in this information to identify the case:

Debtor name XCOR Aerospace, Inc., a California Corporation

United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

# Official Form 206H

## Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

### 1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

| Name | Mailing Address                                  | Name | Check all schedules that apply:  |
|------|--|------|--|
| 2.1  | <div>Street</div> <div>City State Zip Code</div> |      | <input type="checkbox"/> D<br><input type="checkbox"/> E/F<br><input type="checkbox"/> G |
| 2.2  | <div>Street</div> <div>City State Zip Code</div> |      | <input type="checkbox"/> D<br><input type="checkbox"/> E/F<br><input type="checkbox"/> G |
| 2.3  | <div>Street</div> <div>City State Zip Code</div> |      | <input type="checkbox"/> D<br><input type="checkbox"/> E/F<br><input type="checkbox"/> G |
| 2.4  | <div>Street</div> <div>City State Zip Code</div> |      | <input type="checkbox"/> D<br><input type="checkbox"/> E/F<br><input type="checkbox"/> G |

Fill in this information to identify the case:

Debtor name XCOR Aerospace, Inc., a California CorporationUnited States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 207

## Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

## Part 1: Income

## 1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that applyGross revenue  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:  
From 1/01/2017 to Filing Date

☒ Operating a business  
☐ Other \_\_\_\_\_

\$140,000.00

For prior year:  
From 1/01/2016 to 12/31/2016

☒ Operating a business  
☐ Other \_\_\_\_\_

\$1,907,876.00

For year before that:  
From 1/01/2015 to 12/31/2015

☒ Operating a business  
☐ Other \_\_\_\_\_

\$1,234,505.00

## 2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.

Description of sources of revenue

Gross revenue from  
each source  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:  
From 1/01/2017 to Filing Date

License fee for Sony's use of  
XCOR IP

\$50,000.00

For prior year:  
From 1/01/2016 to 12/31/2016

Refund less interest  
adjustment

\$86.86

For year before that:  
From 1/01/2015 to 12/31/2015

Grant revenue \$3,143,816.00,  
Other \$6,902.43, Interest  
\$516.96, Refunds \$1,898.40

\$3,153,133.79

## Part 2: List Certain Transfers Made Before Filing for Bankruptcy

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

page 1



Debtor XCOR Aerospace, Inc., a California Corporation

Case number (if known) \_\_\_\_\_

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

| Creditor's Name and Address   | Dates   | Total amount of value | Reasons for payment or transfer<br>Check all that apply  |
|---|---|-----------------------|--|
| 3.1. Blue Cross Blue Shield<br>Health Care Service Corp<br>PO Box 731428<br>Dallas, TX 75373                | 8/02/2017;<br>9/28/17                         | \$21,153.56           | <input type="checkbox"/> Secured debt<br><input type="checkbox"/> Unsecured loan repayments<br><input type="checkbox"/> Suppliers or vendors<br><input type="checkbox"/> Services<br><input checked="" type="checkbox"/> Other <u>Health Insurance</u>                         |
| 3.2. IPFS<br>PO Box 412086<br>Kansas City, MO 64141   | 8/10/2017;<br>9/14/17;<br>10/2017;<br>11/2017 | \$12,351.54           | <input type="checkbox"/> Secured debt<br><input type="checkbox"/> Unsecured loan repayments<br><input type="checkbox"/> Suppliers or vendors<br><input type="checkbox"/> Services<br><input checked="" type="checkbox"/> Other <u>Directors and Officers Insurance/monthly</u> |
| 3.3. ADP, LLC<br>PO Box 842875<br>Boston, MA 02284  | 8/18/2017                                     | \$9,889.96            | <input type="checkbox"/> Secured debt<br><input type="checkbox"/> Unsecured loan repayments<br><input type="checkbox"/> Suppliers or vendors<br><input type="checkbox"/> Services<br><input checked="" type="checkbox"/> Other <u>Payroll</u>                                  |
| 3.4. Belastingdienst<br>Kantoor Utrecht<br>Kantoor Utrecht, Herman Gorterstr.55<br>Utrecht, The Netherlands | 9/01/2017                                     | \$8,805.94            | <input type="checkbox"/> Secured debt<br><input type="checkbox"/> Unsecured loan repayments<br><input type="checkbox"/> Suppliers or vendors<br><input type="checkbox"/> Services<br><input checked="" type="checkbox"/> Other <u>Income Taxes for Netherlands employee</u>    |
| 3.5. Mojave Air & Space Port<br>1434 Flightline<br>Mojave, CA 93501   | 8/10/17;<br>9/12/2017;<br>10/2017;<br>11/2017 | \$50,526.59           | <input type="checkbox"/> Secured debt<br><input type="checkbox"/> Unsecured loan repayments<br><input type="checkbox"/> Suppliers or vendors<br><input type="checkbox"/> Services<br><input checked="" type="checkbox"/> Other <u>Property Lease/monthly.</u>                  |

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

| Insider's name and address<br>Relationship to debtor | Dates | Total amount of value | Reasons for payment or transfer |
|--|-------|-----------------------|---------------------------------|
|--|-------|-----------------------|---------------------------------|

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at

Debtor XCOR Aerospace, Inc., a California Corporation

Case number (if known) \_\_\_\_\_

a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

| Creditor's name and address | Describe of the Property | Date | Value of property |
|-----------------------------|--------------------------|------|-------------------|
|-----------------------------|--------------------------|------|-------------------|

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

| Creditor's name and address | Description of the action creditor took | Date action was taken | Amount |
|-----------------------------|---|-----------------------|--------|
|-----------------------------|---|-----------------------|--------|

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

| Case title<br>Case number                             | Nature of case | Court or agency's name and address  | Status of case  |
|---|----------------|---|---|
| 7.1. Ronald Moreck v. XCOR Aerospace, Inc.<br>CV00164 | Civil          | United States District Court<br>Western District of Texas<br>200 East Wall, Room 222<br>Midland, TX 79701 | <input checked="" type="checkbox"/> Pending<br><input type="checkbox"/> On appeal<br><input type="checkbox"/> Concluded |
| 7.2. Space Florida v. XCOR Aerospace, Inc.<br>CV53922 | Civil          | Midland County District Court<br>142nd District Court<br>500 N. Loraine St.<br>Midland, TX 79701          | <input checked="" type="checkbox"/> Pending<br><input type="checkbox"/> On appeal<br><input type="checkbox"/> Concluded |

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

| Recipient's name and address | Description of the gifts or contributions | Dates given | Value |
|------------------------------|---|-------------|-------|
|------------------------------|---|-------------|-------|

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Debtor XCOR Aerospace, Inc., a California Corporation

Case number (if known) \_\_\_\_\_

**Description of the property lost and how the loss occurred****Amount of payments received for the loss****Dates of loss****Value of property lost**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.**Who was paid or who received the transfer?  
Address****If not money, describe any property transferred****Dates****Total amount or value**11.1. **Walter Wilhelm Law Group**  
205 E. River Park Circle, Suite 410  
Fresno, CA 93720

See attached Disclosure of Compensation

Email or website address \_\_\_\_\_

Who made the payment, if not debtor? \_\_\_\_\_

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.**Name of trust or device****Describe any property transferred****Dates transfers were made****Total amount or value****13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.**Who received transfer?  
Address****Description of property transferred or payments received or debts paid in exchange****Date transfer was made****Total amount or value**13.1 **Harry Van Hulten**  
40648 Champion Way  
Palmdale, CA 93551

Sale of 2006 Ford F250 Pickup.

November  
2017

\$11,287.00

Relationship to debtor \_\_\_\_\_

13.2 **Eber West**  
39017-161 Street East  
Palmdale, CA 93591

Sale of modified shipping container.

7/12/17

\$500.00

Relationship to debtor  
Employee

Debtor XCOR Aerospace, Inc., a California Corporation

Case number (if known) \_\_\_\_\_

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address

Dates of occupancy  
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services  
the debtor providesIf debtor provides meals  
and housing, number of  
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**☒ No.☐ Yes. State the nature of the information collected and retained.**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☐ No. Go to Part 10.☒ Yes. Does the debtor serve as plan administrator?☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

ADP 401K Plan, Policy #101330

Employer identification number of the plan

EIN: 77-0531367

Has the plan been terminated?

☐ No☒ Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ NoneFinancial Institution name and  
AddressLast 4 digits of  
account numberType of account or  
instrumentDate account was  
closed, sold,  
moved, or  
transferredLast balance  
before closing or  
transfer**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this

Debtor XCOR Aerospace, Inc., a California Corporation

Case number (if known) \_\_\_\_\_

case.

☒ None

Depository institution name and address

Names of anyone with  
access to it  
Address

Description of the contents

Do you still  
have it?

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address

Names of anyone with  
access to it

Description of the contents

Do you still  
have it?

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address

Various

Location of the property

Netherlands

Describe the property

Escrow account believed to  
be held by SXC Spaceline  
N.V. holding funds consisting  
of pre-payments for space  
travel tickets by XCOR  
customers.

Value

Unknown

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

☒ No.

☐ Yes. Provide details below.

Case title

Case number

Court or agency name and  
address

Nature of the case

Status of case

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

☐ No.

☒ Yes. Provide details below.

Site name and address

Governmental unit name and  
address

Environmental law, if known

Date of notice



Debtor XCOR Aerospace, Inc., a California Corporation

Case number (if known) \_\_\_\_\_

| Site name and address  | Governmental unit name and address   | Environmental law, if known | Date of notice |
|--|--|-----------------------------|----------------|
| Mojave Air & Space Port<br>1434 Flightline<br>Mojave, CA 93501 | Kern County Environmental Health Service<br>2700 M St,<br>Suite 300<br>Bakersfield, CA 93301 |                             | 8/2/2017       |

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.  
☐ Yes. Provide details below.

| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice |
|-----------------------|------------------------------------|-----------------------------|----------------|
|-----------------------|------------------------------------|-----------------------------|----------------|

**Part 13: Details About the Debtor's Business or Connections to Any Business**

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

| Business name address  | Describe the nature of the business                                  | Employer Identification number<br>Do not include Social Security number or ITIN. | Dates business existed  |
|--|--|--|---|
| 25.1. XCOR Space Expeditions BV<br>Landhuis Joonchi<br>Kaya Richard J Beaujon z/n<br>PO Box 837, Willemstad<br>Curacao |  | EIN: Unknown   | From-To 2011 - Current (fka SXC Space Expeditions BV and SXC Space Travel BV) |
| 25.2. SXC USA, LLC<br>515 S. Flower St.<br>36th Floor<br>Los Angeles, CA 90071   |  | EIN: SOS Reg. 201216810363   | From-To 2012 - Current  |
| 25.3. XCOR Spaceline NV<br>Landhuis Joonchi<br>Kaya Richard j Beaujon z/n<br>PO Box 837, Willemstad<br>Curaco          |  | EIN: 122716  | From-To 2011 - Current (fka SXC Spaceline NV)                                 |
| 25.4. SXC Asia, LTD.<br>906-9 Harbor Crystal Center<br>Granville Rd.<br>TST East<br>Hong Kong                          | Former 50% interest which has since been sold to other shareholders. | EIN: Unknown   | From-To Unknown - 2015  |

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

| Name and address  | Date of service<br>From-To |
|---|----------------------------|
| 26a.1. Randy Baker<br>2901 Enterprise Lane<br>Midland, TX 79706 | 3/2006-10/2016             |

Debtor **XCOR Aerospace, Inc., a California Corporation**

Case number (if known)

**Name and address**

**Date of service  
From-To**

26a.2. **Laura Collins  
2901 Enterprise Lane  
Midland, TX 79706**

**2/2014-8/2016**

26a.3. **Brian Evans  
3706 W Michigan Ave  
Midland, TX 79703**

**8/2016-8/2017**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

**Name and address**

**Date of service  
From-To**

26b.1. **Sean Pendergast  
400 W Illinois Ave  
Suite 1550  
Midland, TX 79701**

**2016-present**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

**Name and address**

**If any books of account and records are  
unavailable, explain why**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

**Name and address**

26d.1. **Weaver and Tidwell, LLP  
400 W. Illinois, Suite 1550  
Midland, TX 79701**

26d.2. **Group 2000  
Van der Hoopweg 1  
PO Box 333  
7600 AH Almelo  
The Netherlands**

26d.3. **SB Partners, LLP  
3600 Billings Court, Suite 301  
Burlington, Ontario, L7N 3N6**

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

**Name of the person who supervised the taking of the  
inventory**

**Date of inventory**

**The dollar amount and basis (cost, market,  
or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Debtor XCOR Aerospace, Inc., a California Corporation

Case number (if known) \_\_\_\_\_

| Name               | Address  | Position and nature of any interest | % of interest, if any |
|--------------------|--|-------------------------------------|-----------------------|
| Michael Blum       | 2212 Glenbrook Way<br>Las Vegas, NV 89117        | CEO                                 |                       |
| Charles T. Burbage | 3740 Schooner Ridge<br>Alpharetta, GA 30005      | Chairman of the Board               |                       |
| Arthur Bozlee      | 3045 Fairwood Drive<br>Reno, NV 89502            | Board Member                        |                       |
| Esther Dyson       | 632 Broadway<br>10th floor<br>New York, NY 10012 | Board Member                        |                       |
| Lee Valentine      | 13162 Cheltenham Drive<br>Sherman Oaks, CA 91423 | Board Member                        |                       |
| Mark Hoogendoorn   | Gaffelstraat 31<br>3920 Lommel<br>Belgie         | Board Member                        |                       |

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☐ No  
☒ Yes. Identify below.

| Name             | Address                                    | Position and nature of any interest | Period during which position or interest was held |
|------------------|--|-------------------------------------|---|
| John H Gibson II | 4304 Saltillo Court<br>Midland, TX 79707   | CEO                                 | 2/2015-6/2017                                     |
| Randy Baker      | 9303 Winshester Rd.<br>Austin, TX 78733    | CFO/COO                             | 2/2006-9/2017                                     |
| Michael Gass     | 8871 Aspen Leaf Ct.<br>Littleton, CO 80125 |                                     |   |

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No  
☐ Yes. Identify below.

Debtor XCOR Aerospace, Inc., a California Corporation

Case number (if known) \_\_\_\_\_

| Name and address of recipient | Amount of money or description and value of property | Dates | Reason for providing the value |
|-------------------------------|--|-------|--------------------------------|
|-------------------------------|--|-------|--------------------------------|

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation \_\_\_\_\_

Employer identification number of the parent corporation \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation \_\_\_\_\_

Employer identification number of the parent corporation \_\_\_\_\_

**Part 14 Signature and Declaration**

**WARNING** – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 17, 2017

Signature of individual signing on behalf of the debtor \_\_\_\_\_

Michael A. Blum  
 Printed name

Position or relationship to debtor CEOAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No  
☐ Yes

**United States Bankruptcy Court**  
**Eastern District of California**  
**Fresno Division**

In re: XCOR Aerospace, Inc.  
 Chapter 7

Case No. 17-14304

**Disclosure of Compensation of Attorney for Debtor**

1. Pursuant to 11 U.S.C. § 329 (a) and Bankruptcy Rule 2016 (b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy is shown below.
2. The source of the compensation paid to me was:  
                                   ☒ Debtor      ☐ Other
3. The source of compensation to be paid to me is:  
                                   ☒ Debtor      ☐ Other
4. I have not agreed to share the above-disclosed compensation with any other persons unless they are members and associates of my law firm.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
  - a. Analysis of the debtors' financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of the petition, schedules and statement of affairs;
  - c. Representation of the debtor at the initial meeting of the creditors and confirmation hearing;
  - d. Services per engagement letter.
6. I have agreed that a reasonable fee for my services will not be less than the amount of time spent by my law firm, multiplied by the standard hourly rates in effect when the services are rendered.
7. As of the Petition Date, the Firm's standard hourly rates are \$200.00 to \$490.00 per hour for attorneys and \$85.00 to \$150.00 per hour for paraprofessionals.
8. The following payments were received in the past year:

| DATE OF<br>PAYMENT | AMOUNT OF<br>PAYMENT | AMOUNT OF PAYMENT<br>APPLIED TO FEES | AMOUNT OF PAYMENT<br>APPLIED TO COSTS |
|--------------------|----------------------|--------------------------------------|---------------------------------------|
| 10/16/17           | \$15,000.00          |                                      |                                       |
| 10/31/17           |                      | \$5,747.50                           | \$277.81                              |
| 11/08/17           |                      | \$8,605.96                           | \$368.73                              |

9. The above fees were related to services rendered as follows:

|                        |      |
|------------------------|------|
| Bankruptcy Related     | 100% |
| Non-Bankruptcy Related | 0%   |

10. The retainer on hand as of Petition Date was: \$0.00



**United States Bankruptcy Court**  
Eastern District of California  
Fresno Division

In re: XCOR Aerospace, Inc.  
Chapter 7

Case No. 17-14304

**Disclosure of Compensation of Attorney for Debtor**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor in this bankruptcy proceeding.

Date: 11/17/17

  
\_\_\_\_\_  
Riley C. Walter, Attorney for Debtor